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APPLICANTS

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** CONTINUING DATA *****

This application is a DIV of 10/449,440 05/30/2003 *

(*)Data provided by applicant is not consistent with PTO records. *yes UPT*

** FOREIGN APPLICATIONS *****

none UPT

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/25/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 0	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>UPT</i> Initials				

ADDRESS

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TITLE

Low freezing electrolyte for an electrolytic capacitor

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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